ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
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O.I.P.E. CLASSIFIER	Dr.		06-00 01
FORMALITY REVIEW	HO	120	08-01-01
RESPONSE FORMALITY REVIEW		100	

INDEX OF CLAIMS

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	(Through numeral) Canceled		Appeal
	Restricted	0	Objected

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